



COMMISSION *to*
END HUNGER

2012
REPORT



*“Any day you can look at our waiting lines outside
or at our lobbies and see a reflection of the community.*

*Our clients are children, they’re elderly, they’re disabled,
they’re the working poor; they’re definitely the new poor;
and they’re people who are living on the
edge of financial security.”*

- KIM ADAMS-BAKKE, Executive Director, Rock River Valley Pantry, speaking at the Rockford event.



LETTER FROM THE CO-CHAIRS OF THE COMMISSION TO END HUNGER

To the Citizens of Illinois:

As you read this letter, over 1.8 million of our fellow Illinoisans do not know when or where their next meal might come from. On behalf of them, close to 745,000 of whom are children, we and our fellow members of the Commission to End Hunger present this report.

The Commission was created by legislation in 2010 to create a statewide action plan to measurably reduce hunger in Illinois. We believe that no man, woman or child should ever be faced with hunger and applaud the work of all of those who took part in the Commission's meetings and listening tour events, lending their experiences and expertise to guide the report's goals and recommendations.

The effects of hunger are being felt in every county of Illinois and will have significant impact on the health and economic well-being of our residents for years to come. As we traveled Illinois, three major themes emerged to guide the goals and recommendations for the state. We must:

- Improve participation in all federal and state nutrition assistance programs;
- Increase utilization of successful, innovative models; and
- Improve access to quality nutritious foods.

Based on these themes and the Commission's discovery process, we are recommending the following goals:

- End hunger by improving access to quality, nutritious foods among all Illinois populations;
- Build needed state infrastructure and foster communication and collaboration among government programs and agencies;
- Create public awareness of hunger and the solutions;
- Build and expand collaborative partnerships between the public and private sector to implement the Commissions goals.

While the scope of the problem is large, we must embrace these goals and make real progress towards achieving them, using the many tools at our disposal to end the insecurity and fear of those suffering from hunger.

The most critical of these tools is you. The Commission cannot do this alone. Only with the combined efforts of elected officials, leaders in the philanthropic and private sector, and residents from throughout our great state will we make the progress we need. We hope you join us in creating a hunger free Illinois.

Cristal Thomas

Co-Chair

Deputy Governor

Office of Governor Patrick Quinn

Kate Maehr

Co-Chair

Executive Director & CEO

Greater Chicago Food Depository



INTRODUCTION



HUNGER IS A CONDITION TOO MANY OF OUR FELLOW ILLINOISANS FACE DAILY. In the United States, hunger is less a function of the lack of food and more a function of the lack of access: access to nutrient-dense foods, including fresh fruits and vegetables, and access to the public and private programs that can link people to those foods. Without adequate access to nutritious food, people replace with inexpensive nutrient poor foods, resulting in epidemics in obesity and weight and nutrition related diseases such as diabetes.

The effects of hunger are being felt in every county of Illinois and will have significant impact on the health and economic well-being of our citizens for years to come. TO ADDRESS THE ISSUE, THE PUBLIC AND PRIVATE SECTOR CAME TOGETHER TO CREATE THE ILLINOIS COMMISSION TO END HUNGER.

THE COMMISSION TO END HUNGER

WHAT IS THE COMMISSION TO END HUNGER?

The Commission to End Hunger was created by legislation in 2010 to guarantee collaboration among government entities and community partners in order to ensure that no man, woman, or child in Illinois should ever be faced with hunger. The Commission was appointed by Governor Quinn in March of 2011 and met for the first time in May. The Commission was charged with the task of reporting back to the Governor by March of 2012, with the longer term goal of developing an aggressive and achievable action plan every two years that would measurably reduce hunger in Illinois. In less than one year, the Commission has succeeded in engaging a broad base of knowledgeable partners, all contributing their experience and expertise to this report.

WHAT ARE THE OBJECTIVES OF THE COMMISSION TO END HUNGER?

Based on the enabling language the Commission developed three primary objectives for its work:

- **DEVELOP** an action plan that measurably reduces hunger in the first two years of its implementation and identifies long term hunger reduction goals and corresponding strategies
- **ENGAGE** Commission members, work group participants and other allies in implementing the action plan in order to reduce hunger in its first two years
- **EDUCATE** the public, community leaders and elected officials about hunger in Illinois for the purpose of engaging them in the implementation of the Commission's action plan to reduce hunger in the state

WHAT IS THE VISION OF THE COMMISSION?

- No one in Illinois will be without adequate access to quality and nutritious food
- Supplemental and emergency food systems will be customer focused and provide service with dignity.
- There will be “no wrong door” for individuals and families in need of food assistance. There will be multiple entry points for programs and services that will be client-centered as opposed to program-centered.
- Nutrition programs and services will be delivered collaboratively, in a seamless fashion, regardless of whether they are federal, state, municipal or private in nature.

WHAT APPROACH DID THE COMMISSION USE TO PRODUCE THIS REPORT?

The Commission created a Steering Committee and divided into three workgroups in order to best address the complex issues facing those who struggle with hunger. Members participated in a series of learning opportunities and discussion forums designed to gather the best information on hunger and its possible solutions in Illinois.¹



DISCOVERY PROCESS:

- **Monthly working group meetings** focused on population-based barriers to accessing healthy and nutritious foods. The three working groups invited additional community experts to share data and resources with regards to Children and Families at Risk, Vulnerable Adults, and Underserved Populations. The working groups were responsible for identifying strategies, barriers, and opportunities for partnership and funding.
- **Eight listening tour stops** across the state of Illinois. Commissioners, working group members, and community partners and their clients gathered in Rantoul, Peoria, Kane County, Cairo, East St. Louis, Rockford, Marion, and Chicago to hear about the impact of hunger in their community. Participants discussed challenges and barriers to accessing adequate nutrition, and considered possible solutions.
- **Caseworker-for-a-day** sessions at Illinois Department of Human Services Family Community Resource Centers. Commissioners and working group members had the opportunity to shadow local caseworkers for a day in order to better understand the state infrastructure for providing public benefits in a time of increasing need across the state.
- **On-site visits** to a Chicago Public School serving school breakfast using an innovative method, and the Holy Family Food Pantry in Waukegan that successfully operates a Summer Food Service Program site.
- **Steering Committee meetings** to coordinate the efforts of the working groups and draw out key pieces of information to work towards creating strategic goals.
- **The full Commission** met three times to aggregate and prioritize information gathered in working group sessions, Steering Committee meetings, and Listening Tour stops
- **Recommendations from key service providers** including the Illinois Department of Human Services and the Illinois State Board of Education

¹ Please see appendix for full listing of Commissioners, workgroup members and staff.

THEMES

During the discovery process of the Commission, three themes have emerged to guide the goals and recommendations for the state:

1. Improve participation in all federal and state nutrition assistance programs
2. Increase utilization of successful, innovative models
3. Improve access to quality, nutritious foods

These themes cut across all demographic groups. Fulfillment will require strong public and private partnerships with the federal and state government, the network of food banks, pantries, and shelters, community and advocacy organizations, private philanthropy and the business community that work collaboratively to reach those in need.

GOALS

Drawing upon the discovery process and the major themes that arose, the Commission has developed four over-arching goals:

GOAL 1: End hunger by improving access to quality, nutritious food among all Illinois populations

GOAL 2: Build needed state infrastructure and foster communication and collaboration among government programs and agencies

GOAL 3: Create public awareness of hunger and the solutions

GOAL 4: Build and expand collaborative partnerships between the public and private sector to implement the Commission goals

For our state to compete in the 21st century economy, we must address food insecurity and the physical, mental and economic toll it takes on individuals and society. This work is not just one of a Commission and its members. It requires the commitment of our elected leaders, the business and philanthropic community, and our neighbors to ensure its success. While these goals are ambitious, we must strive to achieve them for the well-being of all Illinois residents. To reach these goals, the Commission will launch the Hunger Free Illinois initiative and task it with implementing the goals and recommendations laid out in this report.

THE COST OF FOOD INSECURITY

Food insecurity is the measure that we use to determine what percentage of our community lacks access to adequate, nutritious food to lead a healthy lifestyle. Since 2007, the economic recession and slow recovery has dramatically increased the number of food insecure residents in Illinois. Currently, over 1.8 million or 14.7 percent of Illinois residents face food insecurity including 745,000 of our children—23.3 percent of all children living in Illinois.²

The health and well-being of a society is tied to regular access to and consumption of healthy and nutritious foods. Research has shown food insecurity and poor nutrition influences health throughout the entire lifecycle. Due to food insecurity:

- Infants and toddlers, age's birth to three years old, are particularly vulnerable. A lack of nutritious foods can lead to stunted growth because of the rapid physical, neurological and cognitive growth and development occurring during that time period.³
- Children are more likely to suffer from poor health (both physical and social-emotional) higher school absentee rates, more suspensions and/or behavioral issues, and lower academic performance on achievement tests.⁴
- Adults under the age of sixty are more likely to experience depression, diabetes, chronic diseases, and lower scores on physical and mental health exams.⁵
- Adults at and over sixty experiencing persistent food insecurity are more likely to be in fair or poor health, have limitations in activities of daily life, and have lower intake of energy and critical vitamins. The effect of food insecurity is equivalent to being twenty-one years older.⁶

The costs are not just health related; society bares significant costs. According to the Center for American Progress Hunger in America Report, it is estimated hunger costs our nation \$167.5 billion per year—\$542 for every citizen. We pay through lost economic productivity, poor education outcomes that lead to an unprepared workforce, avoidable health care costs, and the cost of charity to keep people fed.⁷ In Illinois, it cost the state \$6.07 billion in 2010 or \$473 per person. These costs would be even higher without the existing investments from both the government and private sector.

FOOD SECURITY – Access by all people at all times to enough food for an active, healthy life

FOOD INSECURITY - Limited or uncertain availability of nutritionally adequate and safe foods or limited or uncertain ability to acquire acceptable foods in socially acceptable ways.

2 (Map the Meal Gap, 2011)

3 (Cook & Frank, 2008)

4 Ibid

5 (Gundersen & Ziliak, 2011)

6 Ibid

7 (Shepard, Setren, & Cooper, 2011)

COMBATING FOOD INSECURITY

GOVERNMENT RESPONSE

Both federal and state governments play an important role in combating food insecurity. The federal government has funds and sets eligibility criteria for seventeen food assistance programs. In Illinois, three state agencies share the responsibility for administration of these programs: Illinois Department of Human Services (IDHS), Illinois Department on Aging and the Illinois State Board of Education (ISBE). In state fiscal year 2010, funding for all federal programs came to nearly \$3.4 billion in Illinois⁸ with 63 percent of the funds devoted to the Supplemental Nutrition Assistance Program (SNAP).⁹ The largest programs include (see appendix for full listing):

- Supplemental Nutrition Assistance Program (SNAP) formerly known as food stamps
- Special Supplemental Nutrition Program for Women, Infants and Children (WIC)
- National School Lunch and Breakfast Program
- The Emergency Food Assistance Program (TEFAP)
- Title III Nutrition Program through the Older Americans Act
- Child and Adult Care Food Program
- Commodity Supplemental Food Program

The largest federal nutrition program to tackle food insecurity is SNAP. This program provides nutrition assistance in the form of an Electronic Benefit Card (EBT) known as the LINK card. This assistance can be used at retail grocers to purchase food. SNAP is an entitlement program, which means that anyone who qualifies can receive the benefit. This allows the program to expand in times of economic downturn and contract during economic booms. Participants must meet three eligibility tests—gross income, net income and assets. Generally, household income must be at or below 130 percent of the poverty level or \$22,350 for a family of four in 2011.¹⁰

Nationally, in fiscal year 2010, 85 percent of SNAP households lived in poverty. And 76 percent of recipients reside in families with children (under the age of 18), an elderly person (over the age of 60) or a person with disabilities (nonelderly).¹¹ In October of 2011, over 1.8 million residents of Illinois (14.2 percent of the population) received SNAP benefits with an average monthly benefit of \$139.15 in FY 2011. This is a total increase of 6.4 percent over 2010 and 49 percent increase over five years ago.¹²

In addition to nutrition assistance, SNAP dollars support economic activity in communities while encouraging work among participants. Thirty percent of SNAP participants nationally have some earnings and half of all new participants leave the program after ten months.¹³ Recent discussions at the federal level have proposed block granting the SNAP program. Block granting would cap funding for each state, inhibiting the flexibility

⁸ (Illinois Human Services Commission Report, 2010)

⁹ Ibid

¹⁰ See appendix for all eligibility criteria for specific populations.

¹¹ (Nutrition Assistance Program Report Series: Characteristics of Supplemental Nutrition Assistance Program Households: Fiscal Year 2010, 2011)

¹² (SNAP/Food Stamp Monthly Participation Data, 2012)

¹³ (The Benefits of the Supplement Nutrition Assistance Program, 2012)

of the program to meet demand due to downturns in the economy or natural disasters. It is imperative the SNAP program remains intact to combat the effects of economic downturn and support families during troubled times. Any proposal to block-grant SNAP or change benefit or eligibility structure must be fought vigorously.

The USDA estimates that \$1 in SNAP benefits increases GDP by \$1.79.

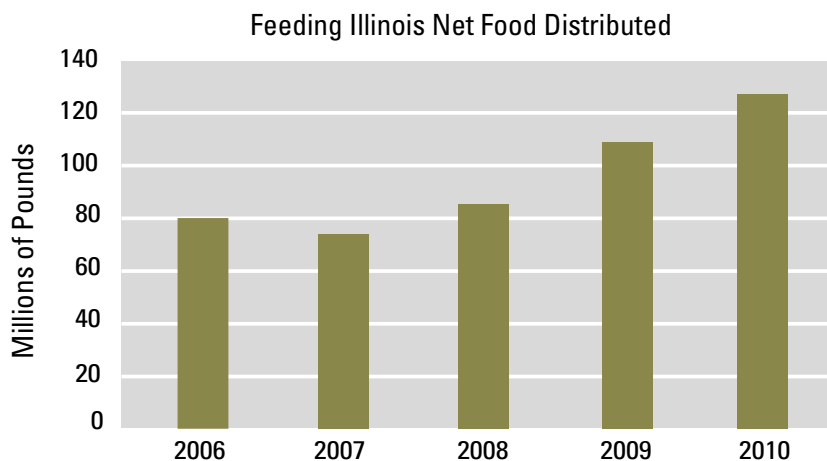
Source: US Department of Agriculture
Economic Research Service

PRIVATE RESPONSE

Despite a number of important government programs, private programs are necessary to fully respond to the need. According to the Feeding America Hunger in America 2010 Report¹⁴, 42 percent of food insecure individuals (over 786,000 people) in Illinois do not qualify for federal nutrition programs. The only safety-net for these individuals are the networks of food banks, food pantries, shelters, and soup kitchens.

One group filling this need is Feeding Illinois, an association of food banks that serve every county in Illinois. In 2010, Feeding Illinois' eight food banks distributed 127 million pounds of food to an estimated 1.4 million people in Illinois—a 17 percent increase over the year prior and a staggering 73 percent increase over three years.

From the outset of the economic downturn, the food banks that serve Illinois have responded to the crisis while dealing with raising food prices and reduced commodity food supply.



14 (Map the Meal Gap, 2011)

Listening Tours

In the summer and fall of 2011, the Commission to End Hunger members traveled Illinois conducting listening tours to better understand regional hunger issues. This fact finding tour gathered first-hand and expert information from individuals who have struggled with food insecurity and public, private and government agencies serving those individuals. Each listening session brought new insights to the work of the Commission and has informed the strategies of its report. In addition to round-table discussions, many events included tours of service provider facilities so Commissioners could better understand the different approaches to reducing hunger in their communities. The following are the locations of the listening tour and a summary of the material Commissioners learned from these events.



UNDERSTANDING THE NEEDS OF MIGRANT WORKERS

Illinois Migrant Council Conference, Rantoul Community Service Center, Rantoul, Illinois

Commissioners met with representatives from the Illinois Migrant Council and Champaign's Wesley Evening Food Pantry to learn about the unique issues migrant workers face as it relates to food insecurity. Since this population is frequently on the move it is difficult for them to connect with services. Food pantry representatives discussed the need for service providers to better understand the unique challenges of these clients and how to adapt services to provide greater assistance.

CHILDHOOD HUNGER: THE PRIVATE RESPONSE

United Methodist Church Summer Program, Peoria, Illinois

This listening tour stop in Peoria examined childhood hunger and the impact on children's overall development. Commissioners listen to a variety of speakers discuss how private and nonprofit partners in Peoria have come together to develop programs to reduce hunger while sharing lunch with a group of children receiving summer meals through the church's private program.

THE HIDDEN FACE OF HUNGER

Wayne Township Pantry, West Chicago and Kane County Farm Bureau, St. Charles, Illinois

In one of the most affluent communities in Illinois, Commissioners heard firsthand from food pantry clients struggling to provide nutritious food for themselves and their families. Service providers shared stories of vulnerable populations such as veterans, people with disabilities and immigrants who often go overlooked in affluent communities but are struggling in this economy. The effects of the foreclosure crisis and long-term unemployment were central themes at this stop.

"I felt that at this listening tour stop it wasn't just what we learned from community leaders, but the relationships we began to build with them.

We learned about their unique challenges but also learned that the challenges they face are similar to those we are seeing in urban and suburban areas.

We left with a shared commitment to ensuring that our state plan reflect their unique challenges and provide sufficient resources to address them."

- Commissioner TRACY SMITH reflecting on the Cairo event.

HUNGER IN RURAL COMMUNITIES

Daystar Community Program, Cairo, Illinois

Alexander and Pulaski Counties are the counties farthest south in the state and home to the highest food insecurity rates. At this meeting, Commissioners learned about the challenges facing rural communities in addressing hunger. In particular, the difficulty in providing services when transportation costs are high and populations are decentralized.

HUNGER AND POVERTY: PROVIDING TOOLS TO MOVE TO SELF-SUFFICIENCY

Lessie Bates, Mary Brown Center, East St. Louis, Illinois

Transportation was again the central theme as this listening tour stop in East St. Louis brought Commissioners to Lessie Bates – a longstanding human services provider. Commissioners heard from members from the surrounding community about the impact of hunger in their community and how agencies like Lessie Bates, the local WIC office, St. Louis Area Foodbank and the Area Agency on Aging are providing a range of services to help their clients address not just hunger but the underlying issues of poverty.

STRUGGLING AT THE THRESHOLD: THE IMPACT OF THE ECONOMIC DOWNTURN AND SOCIAL SERVICE CUTS ON ALREADY STRUGGLING COMMUNITIES

Learning Center, Rockford, Illinois

Commissioners visited Rockford, which has one of the highest unemployment rates of any metropolitan area in the state. The national economic crisis coupled with cuts to social service programs are weighing heavy on the community as they struggle to provide services to meet the needs. This challenging environment has pushed some organizations to re-think how they deliver services yielding new ideas and lessons learned for the state to model.



UNDERSTANDING CURRENT SERVICES

Southern Illinois Service Provider Quarterly Meeting, Marion, Illinois

Commissioners joined a quarterly meeting of service providers who serve rural communities across Southern Illinois. At the meeting, speakers addressed particular challenges facing rural communities, the programs currently addressing hunger and poverty issues, and ideas for working together to reduce hunger. Local elected officials weighed in and addressed the need of state government to play a stronger role in supporting hunger relief programs and solving systemic issues that create food insecure communities.

BRIDGING THE GAP: CONNECTING OLDER ADULTS WITH NUTRITION PROGRAMS

St. Ignatius Food Pantry, Chicago, Illinois

Older adults struggling with hunger are at greater risk of health problems but are often unaware of the nutrition programs available to assist them. Commissioners began this event with an observation of a pantry distribution to older adults. During the roundtable, Commissioners met with service providers who help families, seniors, and immigrant populations access nutrition programs such as SNAP.

These food banks are the back bone of the emergency food network in Illinois, distributing federal commodity food through The Emergency Food Assistance Program (TEFAP) and supporting a network of 2,000 pantries, shelters and soup kitchens. This network is incredibly efficient and taps into the rich community resources in our state. According to the Hunger in America (2010): Illinois Report:

- Food banks are the single most important source of food for agencies with emergency food providers, accounting for 69% of the food distributed by pantries, 50% of the food distributed by kitchens and 48% of the food distributed by shelters.
- 65% of food pantries and 34% of soup kitchens are completely volunteer-run and have no paid staff
- 70% of pantries, 57% of kitchens, and 39% of shelters are run by faith-based agencies.

MORE MUST BE DONE

Despite the government and private response to growing food insecurity, the need is still great. With over 1.8 million Illinoisans facing food insecurity, it is estimated we need an additional \$736 million dollars to fill in the gap. Research has shown that of the 1.8 million at least 42 percent are ineligible for federal nutrition programs.¹⁵ Among the 745,000 food insecure children, 39 percent are likely ineligible for nutrition programs due to income thresholds.¹⁶ Additionally, thousands of eligible individuals are not accessing the programs they are entitled to receive. Many of the non-participants are seniors and working poor families who are among the vulnerable and underserved populations at-risk for hunger.

The Commission to End Hunger acknowledges the limits of nutrition programs to meet the gap. However, we have great room for improving participation among those eligible while identifying new resources to expand programs to those in need. While the scope of the problem is large, we have many of the tools necessary to end the insecurity and fear of those suffering from hunger. With an eye on these programs, collaborations, and private investments, the Commission to End Hunger developed the following goals and recommendations. With everyone as a partner, we can have a hunger free Illinois.

“Most farm workers have to really stretch their pay and their food just to get to the next paycheck. They choose between fuel to get to work and food to feed their families. That’s the experience of many workers. And in the extreme cases, where there’s not enough work, and no pay, the children in these families will go hungry.”

— ELOY SALAZAR, Illinois Migrant Council (Rantoul event)

¹⁵ (Map the Meal Gap, 2011)

¹⁶ (Map the Meal Gap, 2011)

GOAL 1: End hunger by improving access to quality, nutritious food among all Illinois populations

SUB-GOAL 1: END HUNGER AND IMPROVE NUTRITION AMONG CHILDREN IN ILLINOIS

Food insecurity during the childhood years can be devastating to a child's physical, social and emotional development. Over 23 percent¹⁷ of Illinois children at some point in their life will face not knowing when or where their next meal might be come from. For our state and our children to succeed, we must tackle hunger in our youngest residents.

RECOMMENDATION 1: Increase participation in all federal child nutrition programs

- Strategy 1.1: Increase participation in the School Breakfast Program (SBP) and National School Lunch Program (NSLP)
- Strategy 1.2: Increase participation in the Summer Feeding Service Program (SFSP)
- Strategy 1.3: Increase participation in the Child and Adult Care Food Program (CACFP)
- Strategy 1.4: Increase participation in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) with a special focus on retention for children ages one to five
- Strategy 1.5 Encourage school districts to participate in the Community Eligibility Option and Direct Certification for National School Lunch Program (NSLP)

RECOMMENDATION 2: Connect eligible children and families to all available nutrition assistance programs

- Strategy 2.1: Expand the Supplemental Nutrition Assistance Program (SNAP) outreach coordinators within school districts with a focus on at-risk children including eligible children residing in ineligible households
- Strategy 2.2: Develop and implement a strategy to increase SNAP and WIC outreach efforts to include young children not currently enrolled in school or those enrolled in preschool or childcare programs
- Strategy 2.3: Identify, develop, and invest in best practice models for sites to provide a continuum of feeding options for whole families including grandparents—rather than only children—within the Summer Feeding Program and the Child and Adult Care Food Program

RECOMMENDATION 3: Invest in innovative programming

- Strategy 3.1: Identify and duplicate successful programs from around the country and within communities in Illinois such as community gardens, local agriculture, and nutrition education
- Strategy 3.2: Increase public and private funding to maximize successful backpack programs and/or other model for weekend, summer and holiday food programming

¹⁷ (Map the Meal Gap, 2011)

SUB-GOAL 2: END HUNGER AND IMPROVE NUTRITION AMONG VULNERABLE ADULTS (OLDER ADULTS, PERSONS WITH DISABILITIES, THE CHRONICALLY ILL, THE HOMELESS AND VETERANS)

Food insecurity puts vulnerable adults at increased risk of poor health outcomes and decreases their ability to live independently. People with existing health challenges must have adequate nutritious food to manage their health and ensure appropriate absorption of medication. There is opportunity to expand participation in existing federal nutrition programs for this population but it will require outreach and program delivery systems that meet the populations' needs.

RECOMMENDATION 1: Increase SNAP usage by pursuing each strategy below for each vulnerable adult ("VA") population

- Strategy 1.1: Identify and remove the unique, discrete barriers experienced by VAs in accessing SNAP
- Strategy 1.2: Implement state options and seek federal waivers that increase access to SNAP by VAs
- Strategy 1.3: Improve training of state agency staff who come into contact with VAs
- Strategy 1.4: Increase the capacity of social service agencies working with VAs to facilitate VA's participation in SNAP
- Strategy 1.5: Expand outreach to VAs using less traditional access points, including population-specific organizations
- Strategy 1.6: Identify creative solutions to transportation issues VAs face
- Strategy 1.7: Undertake public education campaign to remove stigma of utilizing SNAP

RECOMMENDATION 2: Increase participation by seniors in Older Americans Act programs (home-delivered and congregate meals)

- Strategy 2.1: Pursue innovative strategies to enhance the programs' appeal to seniors
- Strategy 2.2: Identify synergies with other food and nutrition programs that will increase participation

RECOMMENDATION 3: Improve nutrition among vulnerable adults

- Strategy 3.1: Build capacity of persons and organizations working with VAs to assess warning signs of poor nutrition
- Strategy 3.2: Involve health professionals including doctors and pharmacists in promoting better nutrition among VAs

SUB-GOAL 3: END HUNGER AND IMPROVE NUTRITION AMONG ALL UNDERSERVED POPULATIONS (IMMIGRANTS, MIGRANT WORKERS, WORKING POOR, INDIVIDUALS INELIGIBLE FOR FEDERAL NUTRITION PROGRAMS, AND INDIVIDUALS LIVING IN RURAL COMMUNITIES)

Many food insecure people such as new citizens in our state struggle with accessing resources in Illinois because of cultural barriers, transportation barriers, high rates of mobility, and ineligibility for federal nutrition programs. We must reach out to these populations directly through trusted institutions. People in rural communities can be difficult to serve because of transportation barriers and a lack of traditional community hunger-relief partners like large chain retail or manufacturing. Migrant workers who are a critical part of our food supply in Illinois struggle with accessing federal benefits and other charity resources because of their high mobility, long work hours, and lack of access to transportation. To address these challenges, it is important that government programs work collaboratively with private resources to bring creative solutions.

RECOMMENDATION 1: Increase access to food pantries and The Emergency Food Assistance Program (TEFAP) for food insecure adults and families

Strategy 1.1: Increase access to food distribution sites in urban and rural areas by addressing transportation issues and/or increasing points of distribution

Strategy 1.2: Connect families who are ineligible for SNAP to emergency food services in their area

RECOMMENDATION 2: Increase SNAP utilization among eligible but underserved populations

Strategy 2.1: Expand SNAP outreach programs to migrant works and eligible immigrant families

Strategy 2.2: Increase access to SNAP outreach by addressing transportation, language and cultural barriers

RECOMMENDATION 3: Expand and utilize successful models to increase frequency and collaboration around food drives

Strategy 3.1: Provide incentives and opportunities for collaborations between the private sector and community partners to promote and implement food drives

RECOMMENDATION 4: Provide immigrants and mixed-status families with information about programs and eligibility in a culturally and linguistically appropriate manner

Strategy 4.1: Work with appropriate organizations to ensure understanding of program eligibility

Strategy 4.2: Conduct a statewide survey of migrant and seasonal farm workers to gauge food insecurity, map the areas where the need exists, and develop or connect the populations to appropriate services

GOAL 2: Build needed state infrastructure and foster communication and collaboration among government programs and agencies

The duty of state government is to provide services to eligible populations in a timely manner with respect and dignity. Due to exploding caseloads and staff cuts, this goal is difficult to meet. SNAP benefits are processed and administered through IDHS Family Community Resource Centers. With the economic downturn of recent years, caseloads have increased while staffing has decreased. Investing in human and technological infrastructure will allow programs to operate efficiently while treating the client with the respect they deserve.

RECOMMENDATION 1: Invest in state infrastructure and capacity within the Illinois Department of Human Services to ensure all eligible populations are being served in a timely manner with respect and dignity

Strategy 1.2 Hire more caseworkers to process current SNAP caseloads in a timely and efficient manner

Strategy 1.2: Assess and invest in the technological needs of programs to serve clients

- Strategy 1.3: Explore cost effective strategies and partnerships for better serving SNAP-eligible populations
- Strategy 1.4: Ensure all staff are properly trained and equipped to understand the barriers and access issues for the populations they serve including language, culture and transportation
- Strategy 1.5: Investigate having Illinois Department of Human Services office hours reflect the needs of the communities and clients

RECOMMENDATION 2: Develop the technology to connect and share data among multiple state agencies and divisions for efficient and effective targeting of services and populations

- Strategy 2.1 Research and or connect to other state shared technology platforms such as making them accessible to schools, food pantries, and other community organizations

RECOMMENDATION 3: Explore and pursue new federal opportunities to increase access to programs

- Strategy 3.1: Integrate SNAP eligibility determinations into new health insurance eligibility determination process under the Affordable Care Act
- Strategy 3.2: Establish a team dedicated to applying for and administering grants and funding to develop innovative solutions to service provision – including demonstration projects and pilot funding made available through the federal government

RECOMMENDATION 4: Pursue innovative programs to increase access to quality nutritious food in underserved and disadvantaged areas.

- Strategy 4.1 Explore creation of a state program to acquire food from Illinois farmers for distribution through the food bank network.
- Strategy 4.2 Implement the Illinois Fresh Food Fund to help bring grocery stores to food desert areas.
- Strategy 4.3 Expand successful programs such as community gardens, farmers' markets, local/urban agriculture, and nutrition education.

GOAL 3: Create public awareness of hunger and the solutions

The image of hunger is no longer the soup lines of the Great Depression. Instead it is written in the faces of working adults who skip a meal so their children can eat: of children who can't concentrate on their school work because they are distracted by feelings of hunger, or of seniors forced to choose between purchasing food or medication. Tackling food insecurity will require the support and understanding of the issues from everyone not just members of a Commission or elected officials.

RECOMMENDATION 1: Create a public awareness campaign to inform the public on the issue of hunger in Illinois

- Strategy 1.1: Create and test messaging surrounding the issues and solutions of hunger to reduce stigma and increase enrollment

RECOMMENDATION 2: Develop informational messages (PSA's) for appropriate populations regarding available food programs in their area

Strategy 2.1: Target messages to vulnerable and underserved populations using a variety media touch points including social media, mobile devices, toll free information lines and traditional media

RECOMMENDATION 3: Foster new relationships with a variety of public and private partners to encourage enrollment in nutrition programs

Strategy 3.1: Provide accurate and accessible information at multiple points of entry including food pantries, farmers markets, unemployment offices, and physician's offices and ensure staff has a basic understanding of programs and resources

Strategy 3.2: Partner with the medical community to assist with nutrition program information and enrollment

GOAL 4: Build and expand collaborative partnerships between the public and private sector to implement the Commission goals

The issues surrounding food insecurity are numerous and complex. A partnership between government, nonprofit, philanthropic and business communities must be developed and sustained to bring resources to those in need.

RECOMMENDATION 1: Create Hunger Free Illinois to implement the recommendations of the Illinois Commission to End Hunger Report

Strategy 6.1: Create a No Kid Hungry campaign – with support from local and national partners- to implement the recommendation of ending childhood hunger in Illinois.

Strategy 6.2: Maximize private funding opportunities to increase availability of resources recommended in this report to all communities and populations

NEXT STEPS

Each goal and their accompanying recommendations and strategies were developed to provide a roadmap for successful implementation. Over the next year the Commission will:

- Develop and release a detailed action plan laying out the specific strategies and action steps needed to achieve the goals identified by the Commission in this report.
- Launch Hunger Free Illinois, an initiative to ensure the implementation of the recommendations and goals.
- Launch a “No Kid Hungry” campaign to focus on the strategies related to childhood hunger in Illinois.
- Engage a broad spectrum of partners in the implementation of the plan through regional and statewide conference and meetings.

Illinois Commission to End Hunger Relevant Nutrition Programs in Illinois Snapshot						
Program	Federal	State	Population Served / Eligibility	How it Works	Funding	People Served
Supplemental Nutrition Assistance Program (SNAP)	FNS, USDA Food and Nutrition Service (FNS), USDA	Department of Healthcare & Family Services	All persons whose households meet the gross (130% Federal poverty level) and net (100% Federal poverty level) monthly income tests Households with an elderly or disabled member are not required to meet the gross income test. Households where all members receive TANF or SSI are automatically eligible.	Households submit an application through IDHS. If determined to be eligible, SNAP benefits are then provided on a Link Card — an electronic card that the recipient can then use for groceries wherever the card is accepted. The amount of SNAP benefits a household receives is determined by a budgeting of their income and expenses.	FY10 Redemptions \$2,746,041,6971	FY11* 1,793,886 average monthly participants ² *preliminary
Child & Adult Care Food Program (CACFP)	FNS, USDA	Illinois State Board of Education (child) Department of Aging (adult)	Child: 0-12 enrolled in qualifying centers or at-home programs Adult: Functionally impaired adults enrolled in day care or 60+ years old Participants from households with incomes at or below 130% Federal poverty level are eligible for free meals. Participants with household incomes between 130% and 185% Federal poverty level are eligible for meals at a reduced price. Adults who receive SNAP, SSI or Medicaid are automatically eligible for free meals.	USDA gives grants to states who then reimburse participating child and adult institutions and qualified at-home child care homes for meals served on a per snack/meal basis. In addition to cash reimbursement, USDA makes donated agricultural foods or cash-in-lieu of donated foods available to institutions participating in CACFP.	FY11 Cash Payments \$120,606,5683	FY11 Meals Served 87,201,720 FY11 Average Daily Meals in highest month counted 144,1124
Older Americans Act, Home-Delivered Meals	Administration on Aging (AOA), Health and Human Services AOA, Health and Human Services	Department of Aging	People who are aged 60+ and homebound or the spouse of an older individual regardless of age. Also available to those under age 60 with disabilities if they reside with a homebound older individual.	The IL Department. on Aging allocates the funds to the 13 Area Agencies on Aging as required by the Older Americans Act. The Area Agencies on Aging in IL are not, as a rule, direct service providers. They provide grant or contract funds to 84 local nutrition providers that provide the direct service.	FY11 \$38,839,6485	FY10 7,584,674 meals to 40,912 older adults ⁶
Older Americans Act, Congregate Meal Program	AOA, Health and Human Services	Department of Aging	People who are aged 60+ or the spouse of an older individual regardless of age. May be available on a limited basis to those under age 60 if they are: individuals with disabilities who reside with older individuals, volunteers who provide services during meal hours, individuals with disabilities who reside in housing facilities primarily occupied by older individuals at which congregate nutrition services are provided.	The IL Department. on Aging allocates the funds to the 13 Area Agencies on Aging as required by the Older Americans Act. The Area Agencies on Aging in IL are not, as a rule, direct service providers. They provide grant or contract funds to 84 local nutrition providers that provide the direct service.	FY11 \$23,765,1427	FY10 2,805,195 meals to 31,387 older adults. ⁸
The Emergency Food Assistance Program (TEFAP)	FNS, USDA	Illinois Department of Human Services	Individuals or households who are residents of Illinois and have individual or household income no greater than 130% Federal poverty level. People who receive prepared meals at soup kitchens or homeless shelters are considered income eligible.	TEFAP provides food at no cost to help supplement the diets of needy low-income households. USDA buys the food, including processing and packaging, and ships it to the States. IDHS contracts with eight food banks across the state to oversee the release of food to food pantries and soup kitchens.	FY11 Estimated \$10,157,8329	FY11 947,650 visits to TEFAP pantries
Commodity Supplemental Food Programs (CSFP)	FNS, USDA	Illinois Department of Human Services	Low-income pregnant, breastfeeding women, infants, children up to 6 years old between 100% Federal poverty level and 185% Federal poverty level. Adults 60+ years old that are at or below 135% Federal poverty level. According to DHS, more than 97% of those served are elderly.	USDA provides food and administrative funds to States to supplement the diets of eligible participants. In IL, Catholic Charities delivers CSFP goods to eligible participants at 10 food distribution sites and 181 outreach sites throughout Cook County. Tri-State Food Bank delivers food packages to 10 sites in seven counties and the St. Louis Area Food Bank delivers in two counties.	SFY11 \$1,073,52810	SFY11 16,52511

Illinois Commission to End Hunger Relevant Nutrition Programs in Illinois Snapshot						
Program	Federal	State	Population Served / Eligibility	How it Works	Funding	People Served
Seniors Farmers' Market Nutrition Program (FMNP)	FNS, USDA	Illinois Department of Human Services	Seniors who are 60+ years old and who have household incomes of 185% Federal poverty level or less.	Eligible recipients get three dollar checks, which can be redeemed for fresh fruits and vegetables at local farmers' markets in participating counties. Nutrition education materials, including recipes, are also distributed. Not all vendors take FMNP checks.	SFY10 Grant \$875,46512	SFY10 38,50013
Women, Infants, Children (WIC)	DHS-CHP, USDA	Illinois Department of Human Services	Women and their children who are: 1. Pregnant, breastfeeding or just had a baby 2. Infants and Children under 5 years old (includes foster children) 3. Families with a low to medium income and qualify according to USDA WIC Income Eligibility Guidelines To be eligible for WIC, applicants' gross income, before taxes, must fall below 185% Federal poverty level	Provides special checks to purchase healthy foods restricted to selected milk, juice, eggs, cheese, cereal, dry beans or peas and peanut butter. Provides information about nutrition, health and breastfeeding. To improve the health and nutritional status of women, infants and children; to reduce the incidence of infant mortality, premature births and low birth weight; to aid in the development of children; and, to make referrals to other health care and social service providers.	FY 2010 Budget \$299,670,000	FY2011 Preliminary 295,409
School Lunch Program (National School Lunch Program NSLP)	USDA	Illinois State Board of Education	Children from families with incomes at or below 130% Federal poverty level are eligible for free meals. Families between 130% and 185% Federal poverty level are eligible for reduced-price meals. Children from families with incomes over 185% Federal poverty level pay full price, though their meals are still subsidized to some extent.	Available to all public and private schools, and residential child care institutions which agree to operate a non-profit program offering lunches meeting federal requirements to all children in attendance. Requires state matching funds to ensure further federal funding for the School Lunch Program.	FY 2011 \$378,028,104	2010-2011 School Year 1,113,872 average daily meals
School Breakfast Program (School Breakfast Program SBP)	USDA	Illinois State Board of Education	All Illinois public schools are required to offer a free meal to qualifying students – lunch is required and breakfast required if the school operates a breakfast program. Students must receive free meals if they are eligible to receive food stamps or Temporary Assistance to Needy Families (TANF). Students are eligible for Free Breakfast program if they qualify for the Free Lunch program (listed above).	Federal entitlement program in schools and residential child care institutions. Participation is open to all public or non-profit private schools of high school grade or under as well as residential child care institutions. There are various options for serving breakfast such as: Breakfast in the Classroom, Grab 'n Go Breakfast, Breakfast on the Bus, Breakfast After 1st Period, and the traditional breakfast.	FY 2011 \$98,224,803	2010-2011 School Year 382,891 average daily meals in highest month counted
Summer Food Service Program (SFSF)	USDA	Illinois State Board of Education	Serves nutritious meals during the summer months when school is not in session. Children under the age of 18 years or any person 20 years of age or younger with a mental or physical disability that attends an ISBE certified school program during the school year. To qualify the child's household's annual income before taxes should be between 130% and 185% Federal poverty level,	Organizations agree to serve meals that meet USDA nutrition guidelines, in return, the USDA works through Illinois state agencies to reimburse organizations for meals and for administering the program. Sponsoring organizations include: public or private non-profit local educational agencies, entities of state, local, municipal or county government, private non-profits or residential camps.	FY11 \$10,360,691	Summer 2011 53,416 average daily attendance in July 2011

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ILLINOIS COMMISSION TO END HUNGER MEMBERS AND STAFF

APPOINTED COMMISSIONERS:

Mary Ellen Abbott, Illinois Hunger Coalition, Southern Region Field Director
Joseph Antolin, Heartland Human Care Services, Inc., Executive Director
Patricia Bellock, Illinois House of Representatives, State Representative
Betsy Creamer, Illinois Department of Aging, Older American Services Supervisor
John Cheney Egan, Illinois Department of Children and Family Services, Office of Housing and Cash
Esperanza Velasquez-Gonzalez, Illinois Migrant Council, Director of Minority Health Programs
Marla Goodwin, Jeremiah's Food Pantry, Director
Mark Haller, Illinois State Board of Education, Nutrition Programs
Don Harmon, Illinois State Senate, State Senator, President Pro Tempore
Lisa Hernandez, Illinois House of Representatives, State Representative, 24th District
Grace Hou, Illinois Department of Human Services, Assistant Secretary
Juanita Irizarry, The Chicago Community Trust, Program Officer
Mark Ishaug, AIDS United, President and CEO
Ahlam Jbara, Council of Islamic Organizations of Greater Chicago, Associate Director
Barbara Karacic, Holy Family Food Pantry, Food Pantry Services Director
Dan Lesser, Sargent Shriver National Center on Poverty Law, Director, Economic Security
Kerry Lofton, Illinois Department of Agriculture, Office of the Director
Katherine Maehr, Greater Chicago Food Depository, Executive Director, CEO
John Millner, Illinois Senate, State Senator
Nicole Robinson, Kraft Foods Foundation, Vice President
Kathleen Ryg, Voices for Illinois Children, President
Amy Rynell, Social IMPACT Research Center at Heartland Alliance, Director
Kappy Scates, Scates Farms, Owner
Tracy Smith, Feeding Illinois, State Director
Terry Solomon, Illinois African-American Family Commission, Executive Director
Cristal Thomas, Office of Governor Pat Quinn, Deputy Governor
Gary Tomlin, Knox County,
Peter Vina, Illinois Department of Healthcare and Family Services, Deputy Director, Outreach

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Janet Campbell, Illinois State Board of Education
Tom Browning, Illinois Action for Children

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Alham Jbara, Council of Islamic Organizations of Greater Chicago
Kerry Lofton, Illinois Department of Agriculture
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Julie Murphy, Senior Vice President, Midwest Division, Walmart
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Peter Vina, Illinois Department of Healthcare and Family

VULNERABLE ADULTS:

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Betsy Creamer, Illinois Department of Aging
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